As the below named inventor(s), I/we declare that:

SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

This declaration is directed to:			
☐ The attached application, or			
☐ Application No,	, filed on,		
☐ as amended on	(if applicable);		
I/we believe that I/we am/are the original and first inventor( which a patent is sought;	s) of the subject matter which is claimed and for		
I/ we have reviewed and understand the contents of the abas amended by any amendment specifically referred to abo			
I/we acknowledge the duty to disclose to the United States known to me/us to be material to patentability as defined in which became available between the filing date of the prior International filing date of the continuation-in-part application	n 37 CFR 1.56, including material information rapplication and the National or PCT		
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.			
FULL NAME OF INVENTOR(S)			
FULL NAME OF INVENTOR(S)  Inventor one: Guadalupe M. Rojas			
, ,	Citizen of: Mexico		
Inventor one: Guadalupe M. Rojas	Citizen of: Mexico		
Inventor one: Guadalupe M. Rojas  Signature: 4 Jac Jell C	Citizen of: Mexico  Citizen of: Mexico		
Inventor one: Guadalupe M. Rojas  Signature: Juan A. Morales-Ramos			
Inventor one: Guadalupe M. Rojas  Signature: Juan A. Morales-Ramos  Signature: Juan A. Morales-Ramos			
Inventor one: Guadalupe M. Rojas  Signature: Juan A. Morales-Ramos  Signature: David R. Nimocks, III	Citizen of: Mexico		
Inventor one: Guadalupe M. Rojas  Signature: Juan A. Morales-Ramos  Signature: David R. Nimocks, III  Signature:	Citizen of: Mexico		
Inventor one: Guadalupe M. Rojas  Signature: Juan A. Morales-Ramos  Signature: David R. Nimocks, III  Signature: Inventor four:  Signature: Signature: Signature:	Citizen of: Mexico  Citizen of: U.S.		

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number. **Application Number** Filing Date **POWER OF ATTORNEY OR** First Named Inventor Guadalupe M. Rojas AUTHORIZATION OF AGENT **Group Art Unit Examiner Name** Attorney Docket Number 0217.99 I hereby appoint: Practitioners at Customer Number OR 25712 □ Practitioner(s) named below: Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR □Firm or Individual Name Address Address City State Zip Country Telephone Fax I am the: ☑ Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Guadalupe M. Rojas Signature Date 12-18-2000

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.

Submit multiple forms if more than one signature is required, see below\*.

forms are submitted.

\*Total of \_

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	Application Number		
POWER OF ATTORNEY OR	Filing Date		
	First Named Inventor	Guadalupe M. Rojas	
AUTHORIZATION OF AGENT	Group Art Unit		
	Examiner Name		
	Attorney Docket Numb	per 0217.99	
I hereby appoint:  ☐ Practitioners at Customer Number  ☐ Practitioner(s) named below:	25712		
Name	Registr	ation Number	
		4-14-4-4	
as my/our attorney(s) or agent(s) to prosec	cute the application ider	ntified above, and to transact all	
business in the United States Patent and T			
OR □Firm or Individual Name			
Address		,	
Address			
City	State	Zip	
Country			
Telephone	Fax		
<ul> <li>I.am the:</li> <li>☑ Applicant/Inventor.</li> <li>☐ Assignee of record of the entire interest. So Statement under 37 CFR 3.73(b) is enclose</li> </ul>			
SIGNATURE of A	pplicant or Assignee of	Record	
Name Juan A. Morales-Ramos			
Signature			
	12/18/2000		
Date 12/	18/2000		
NOTE: Signatures of all the inventors or assignees of re Submit multiple forms if more than one signature is requ	ecord of the entire interest of	or their representative(s) are required.	

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